



**CITY OF BAINBRIDGE ISLAND/
BAINBRIDGE ISLAND FIRE DEPARTMENT**



Commercial Address Request Form

PLANNING AND COMMUNITY DEVELOPMENT ●

280 Madison Ave. N ● Bainbridge Island, WA 98110 ●

(206) 842-2552 ● Fax: (206) 780-0955

Email: pcd@ci.bainbridge-isl.wa.us

The City coordinates addresses and street names with the Bainbridge Island Fire District, CENCOM(911), the post office, and the Police Department so that emergency vehicles and personnel can quickly and accurately find the location to which they've been called and so that mail may be delivered accurately.

Please return this form to the Department of Planning & Community Development.

Reason for request: ☐ **NEW** ☐ **CORRECTION** ☐ **CHANGE** ☐ **ADDITIONAL**

NAME: _____ **PHONE:** _____

EMAIL ADDRESS: _____

If you do not have an email address, you must come into the office to receive your approved address paperwork.

MAILING ADDRESS: _____

Tax Lot Number (Assessor's Account #): _____
(For parcel being assigned address)

Name of Street being accessed: _____
(i.e. Madison Ave N.)

Building Permit #: BLD _____

Attach a site plan/diagram of the property, including all road names in the area and addresses of neighbor's. Include driveways and access from the street. If addressing multi-family units or commercial tenant space, provide a diagram of the buildings and units.

Your **NEW ADDRESS** is: _____

Commercial Properties are required by law to display their new number in numerals not less than five inches in height on a contrasting background on the front of their building, unless it is not visible from the road way, in which case they shall be displayed at the main entrance to the property. If any information changes or is incomplete, your assigned address may be subject to change.

Internal Use Only:

<input type="checkbox"/> Sent to BIFD	By: _____	Date: _____
<input type="checkbox"/> Address Assigned	By: _____	Date: _____
<input type="checkbox"/> KSAM Updated	By: _____	Date: _____
<input type="checkbox"/> Tidemark Updated	By: _____	Date: _____

BIFD/COBI ADDRESS

COMMERCIAL

- _____ Type of request, new, correction, change, ADU etc
- _____ Applicant Name, Mailing Address, Phone, Email
- _____ Map showing property location, official plat map with tax lot number preferred
- _____ Nearest address(s) on either/all side(s) of property
- _____ House site plan with driveway access
- _____ Fee Paid (No Charge at this time)